								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									09	Ö	080	04	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LL i	ENTITY	OR	OTHER		
FOR NUMBER FILED NUMBER EXTRA							RAT	E	FEE	1	RATE	FEE	
BASIC FEE							, , č	:- <u>4</u>	345.00	OR		690.00	
то	TAL CLAIMS		3	minus 2	20=	X\$ 9)=		OR	X\$18=	216		
INDEPENDENT CLAIMS minus 3 = *						2	X39			1	X78=	15/2	
MULTIPLE DEPENDENT CLAIM PRESENT										OR		Di To	
* If	the difference	ımn 1 is	less than ze	column 2	+130			OR	+260=	300			
•••				JOIGHIN Z	TOTA	۸L		OR	TOTAL	1412			
CLAIMS AS AMENDED - PART !I (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CL REM Af	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	Ę	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**	=	X\$ 9	11		OR	X\$18=		
	Independent	*		Minus	***	=	X39:	=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=	· . 		+260=		
·								= TAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEEOR ADDIT. FEE					
AMENDMENT B		AIMS		HIGHEST	(Column 3)			ADDI	1 1				
		AF	AINING TER IDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	Ξ.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**	=	X\$ 9	=		OR	X\$18=	<u> </u>	
	Independent	*		Minus	***	=	X39=	=		OR	X78=		
	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	PENDENT CLAIM		400				000		
							+130			OR	+260= TOTAL	_	
								EE		OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C		AF	AINING TER IDMENT	·	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**	=	X\$ 9:	_		OR	X\$18=		
	Independent	*		Minus	***	=	X39=				X78=	 	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\dashv		OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OPTION OF TOTAL ADDIT. FEE ADDIT. FEE													
	The "Highest Num	ber Pre	viously Pai	d For" (Total o	Independent) is the	in 3, enter 3. e highest number fot	and in the	app	oropriate bo	x in col	umn 1.		